AMENDMENT TRANSMITTAL LETTER (Small Entity) Applicant(s): Conway et al.						Docket No. 6570/91244	
Application No.	Filing Date	Examiner Amy Jo Sterling		Customer N 24628	lo.	Group Art Unit 3632	Confirmation No.
(S)P							<u> </u>
DINVENTION: O TO THE STATE OF T							
COMMISSIONER FOR PATENTS:							
Transmitted herewith is an amendment in the above-identified application.							
Applicant claims small entity status. See 37 CFR 1.27							
The fee has been calculated and is transmitted as shown below.							
CLAIMS AS AMENDED							
	CLAIMS REMAINING	HIGHEST #	NUMB	ER EXTRA		DATE	ADDITIONAL
•	AFTER AMENDMENT	PREV. PAID FOR	CLAIMS	PRESENT		RATE	FEE
TOTAL CLAIMS	19 -	20 =		0	x	\$25.00	\$0.00
INDEP. CLAIMS	3 -	3 =		0	x	\$100.00	\$0.00
Multiple Dependent Claims (check if applicable)							\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT							\$0.00
 No additional fee is required for amendment. □ Please charge Deposit Account No. in the amount of □ A check in the amount of to cover the filing fee is enclosed. ☑ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 23-0920 ☑ Any additional filing fees required under 37 C.F.R. 1.16. ☑ Any patent application processing fees under 37 CFR 1.17. □ Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. □ Dated: 16 October 2006 □ L. Friedman □ L. Friedman □ Verify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. 							
120 South Riverside Plaza, 22nd Floor Chicago, IL 60606 (312) 655-1500 - Telephone (312) 655-1501 - Facsimile Ifriedman@welshkatz.com - E-mail Chicago, IL 60606							

cc:

Carolyn R. Gutwaks

Typed or Printed Name of Person Mailing Correspondence